01-R-0392

Entered -volodyy - sp CL 99L0544 - GWENDOLYN BURNS Entered -08/31/99 - sb

CLAIM OF: BETTY W. HIEBER 2494 Sharondale Drive, NE

For property damage alleged to have been sustained due to a flood at the property damage alleged to have overflowing on Inty 6 1000 at which occurred as a result of the creek overflowing on the creek overflowing on the creek overflowing on the control of t For property damage alleged to have been sustained due to a flood to have been sustained due to a flood at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on July 6, 1999 at which occurred as a result of the creek overflowing on the creek overflowing on the creek overflowing on the creek overflowing or the c

2495 Sharondale Drive.

A Su Date Conf

Date o Departm. Employe

NATURE C result of the ci did not have a Furthermore, the on the day of the O.C.G.A. §36-33-1

INVESTIGATION:

Statements: City empi Pictures Pictures _____ Diagr. Traffic citations issued: (Citation disposition: City

BASIS OF RECOMMEND

Y-1	
Function: Govern	
Function: Governmental_ Improper Notice	
C: Notice	
City not invest	$_{-}M_{O_{i}}$
- Cualifranta	
Repair/replacement by Ins. Claimant Negligent	C
Negligent 1113.	Co
0 -80H	

THIS ADVERSED REPORT IS APPROVED Rubert Youell

DEPUTY CITY ATTORNEY

BURNS 08/27/99 ,19,1999

COUNCIL OF THE CITY OF ATLANTA MUNICIPAL CLERK

City Hall 55 Trinity Avenue, S.W. Atlanta, Georgia 30335

Dear Municipal Clerk:

RE: CLAIM FOR DAMAGES

Today's Date: 019 19 19 9

ENTERED - 8-31-99 -SB 99L0544 - GWEN BURNS

and/or \$bodily	that I have suffere injury for which I	ed damages in the an	nount sum of \$ 5,000,00 property
1. Date of incident: (month/day	/ 4 4 4 2. Ti / year)	me of Incident:	3. Police called:
and a mindred in (in including street ad	ldress): 🔏 445	SHADRAIS	7 m / 7 m
5. I wante or your insurance company:	TATO FAL	2 m - //	7 / "
THE POOR	- DROKEW-	Rill end	·
LAWN MOWER, FURI	VACE & All	Reowliter-	Serviced.
7. ALL ESTIMATES AND DAMAGES	S ARE SUBJECT T	O INSPECTION OF	HE MAKING OF FALSE CLAIMS WILL
estimates of repair and proof of own			
Your vehicle:		rucle (copy of the cur	rent tag receipt or title).
/3 / 3			
(Make)	(Year)	(Tag Number)	(Driver's Name)
City vehicle:			(Driver's Name)
City vehicle:(Make)		(Tag Number) r's Name)	(Driver's Name) (Department/Bureau)
City vehicle:		r's Name)	(Department/Bureau)
9. Witness:(Name) 10. The acknowledgement of this slow	(City Driver	r's Name) (Address)	(Department/Bureau) (Telephone Number)
(Make) 9. Witness:	(City Driver in no way waives iability on behalf	r's Name) (Address) the Sovereign immusof the City of Atlanta	(Department/Bureau) (Telephone Number)
(Make) 9. Witness:	(City Driver in no way waives iability on behalf	r's Name) (Address) the Sovereign immusof the City of Atlanta	(Department/Bureau) (Telephone Number)
(Make) 9. Witness: (Name) 10. The acknowledgement of this claim State law, nor is it an admission of l 11. This claim should be mailed immediated immed	(City Driver in no way waives iability on behalf ately to the addre	r's Name) (Address) the Sovereign immusof the City of Atlanta	(Department/Bureau) (Telephone Number) nity of the City of Atlanta, as granted by a and/or its employee(s).
City vehicle: (Make) 9. Witness: (Name) 10. The acknowledgement of this claim: State law, nor is it an admission of l 11. This claim should be mailed immedi I HEREBY SWEAR OR AFFIRM THA INFORMATION IS TRUE AND COR	(City Driver in no way waives iability on behalf ately to the addre	r's Name) (Address) the Sovereign immus of the City of Atlanta ss shown above.	(Department/Bureau) (Telephone Number) nity of the City of Atlanta, as granted by a and/or its employee(s). (Print Clamaint's Name)
(Make) 9. Witness: (Name) 10. The acknowledgement of this claim State law, nor is it an admission of l 11. This claim should be mailed immediated immed	(City Driver in no way waives iability on behalf ately to the addre	r's Name) (Address) the Sovereign immus of the City of Atlanta ss shown above.	(Department/Bureau) (Telephone Number) nity of the City of Atlanta, as granted by a and/or its employee(s). (Print Clamaint's Name) SA/ARONDAL DR. N.E.
City vehicle: (Make) 9. Witness: (Name) 10. The acknowledgement of this claim: State law, nor is it an admission of l 11. This claim should be mailed immedi I HEREBY SWEAR OR AFFIRM THA INFORMATION IS TRUE AND COR	(City Driver in no way waives iability on behalf ately to the addre	r's Name) (Address) the Sovereign immus of the City of Atlanta ss shown above.	(Department/Bureau) (Telephone Number) nity of the City of Atlanta, as granted by a and/or its employee(s). (Print Clamaint's Name)
Gity vehicle: (Make) 9. Witness: (Name) 10. The acknowledgement of this claim: State law, nor is it an admission of l 11. This claim should be mailed immedi I HEREBY SWEAR OR AFFIRM THA INFORMATION IS TRUE AND COR Signature of Flaimant	(City Driver in no way waives iability on behalf ately to the addre	r's Name) (Address) the Sovereign immus of the City of Atlanta ss shown above.	(Department/Bureau) (Telephone Number) nity of the City of Atlanta, as granted by a and/or its employee(s). (Print Clamaint's Name) SA/ARONDAL DR. N.E.
City vehicle: (Make) 9. Witness: (Name) 10. The acknowledgement of this claim: State law, nor is it an admission of l 11. This claim should be mailed immedi I HEREBY SWEAR OR AFFIRM THA INFORMATION IS TRUE AND COR	(City Driver in no way waives iability on behalf ately to the addre	r's Name) (Address) the Sovereign immus of the City of Atlanta ss shown above.	(Department/Bureau) (Telephone Number) Inity of the City of Atlanta, as granted by a and/or its employee(s). (All HEBE 12 (Print Clamaint's Name) (Address) (Address) (City, State and Zip Code)

Entered -08/31/99 - sb CL 99L0544 - GWENDOLYN BURNS

CLAIM OF: BETTY W. HIEBER 2494 Sharondale Drive, NE Atlanta, Georgia 01-2-0392

For property damage alleged to have been sustained due to a flood which occurred as a result of the creek overflowing on July 6, 1999 at 2495 Sharondale Drive.

THIS ADVERSED REPORT IS APPROVED

ROSALIND RUBENS NEWELL DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 99L0544	Date: February 2, 2001
	_
Claimant /VictimBETTY W. HIEBE	R
BY: (Atty) (Ins. Co.) Address: 2495 Sharondale Drive, Atlan	
Address: 2495 Sharondale Drive, Atlan	ta, Georgia 30305
Subrogation: Claim for Property dan	nage \$ <u>5,000.00</u> Bodily Injury \$
Date of Notice: 8/2//99 Met	hod: Written, Proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5	X Ante Litem (6 Mo.) X
Date of Occurrence //6/99	Place: 2495 Sharondale Drive, NE
Department PUBLIC WORKS Division	hod: Written, Proper X Improper X Ante Litem (6 Mo.) X Place: 2495 Sharondale Drive, NE SEWER OPERATIONS
Employee involved Disc	iplinary Action:
NATURE OF CLAIM: Claimant sustained a	property damage when the basement of her home was flooded as a
result of the creek overflowing behind her home	e on the above-listed date. An investigation determined that the City
did not have any complaints of debris or fal	llen trees in the creek until after the date of claimant's incident.
Furthermore the City experienced an unusually	v large amount of rainfall during a severe rain storm, an "act of God",
on the day of the incident which caused the ca	reek to overflow. The City is immune from liability as set forth in
O.C.G.A. §36-33-1.	cek to overnow. The City is infinulte from fraotity as set forth in
O.C.G.A. §50-55-1.	
INVESTIGATION:	
Statements: City employee X Claima	nt Others Written X Oral
Pictures Diagrams Report	ts: Police Dept Report X Other
Traffic citations issued: City Driver	Claimant Driver
Citation disposition: City Driver	Claimant Driver
·	
BASIS OF RECOMMENDATION:	
Function: Governmental X	MinisterialOther X Damages reasonable
Improper Notice More than Six Mo	onths Other X Damages reasonable
City not involved Of	fer rejected Compromise settlement
Repair/replacement by Ins. Co.	Repair/replacement by City Forces
Claimant Negligent City Neglige	entJointClaim Abandoned
	Respectfully submitted,
	\mathcal{G}
	/ Julian of
	INVESTIGATOR - GWENDOLYN BURNS
DECOMMEND ATTOM	
RECOMMENDATION:	
Pay \$	Account charged, 1A01 2T01 2T701
Pay \$ Adverse X	Account charged: 1A01 2J01 2H01 2H01
Claims Manager: Mun Must la	Concur/date 03-01-01
Committee Action:	Council Action

DURNS 08/27/99

COUNCIL OF THE CITY OF ATLANTA MUNICIPAL CLERK

City Hall 55 Trinity Avenue, S.W. Atlanta, Georgia 30335

ENTERED - 8-31-99 -SB

Dear Municipal Clerk:

99L0544 - GWEN BURNS

RE: CLAIM FOR DAMAGES

Today's Date:__

	ar manacipus Cicini							
Th an	is is to notify the City of Atlanta td/or\$bodily	hat I have suffered injury for which I co	damages in the amour intend the City is liable.	t sum of \$ <u>5</u>	. 00000 P	roperty		
1.	Date of incident:	/ 4 4 4 2. Time / year)	e of Incident:	3. Police	ralled:Yes	No		
4.	Location of incident (including street ad	idress): 4495	SHARONDA	Le DK.				
5.	. Name of your insurance company: State FARM - Home INS Policy No. 11-B & 285							
6.	State what and how incident occurred:	Flood.	3' WATER 1	N BASE.	ment.			
CLASS Sliding DOOR BROKEN- BILL enchuced.								
	Sota, Antique B	ench. Chek	1 N up. 400.					
	LHWW MOWER, FUR		•			ed.		
7.	ALL ESTIMATES AND DAMAGE RESULT IN YOUR CLAIM BEING	ES ARE SUBJECT T	O INSPECTION. THE	MAKING OF I	ALSE CLAIMS			
8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2 estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).								
	Your vehicle:(Make)		(Tag Number)		 			
				(Di	river's Name)			
	City vehicle:(Make)	(City Drive	er's Name)	(Depart	ment/Bureau)			
9.	Witness:							
	(Name)		(Address)	(Telepho	one Number)			
10	The acknowledgement of this cla State law, nor is it an admission					ranted by		
11	. This claim should be mailed imm	ediately to the add	ress shown above.		/			
	I HEREBY SWEAR OR AFFIRM INFORMATION IS TRUE AND		B=7	(Print Clamair	HIEBEP			
	INFORMATION IS TRUE AND	lin	2405	SHARON		1 N.F		
	Signature of Claimant			(Addre		, , , ,		
A + LANIH, FR. (City, State and Zip C								
	04 / 0000	<u></u>	4	101-237-54	14			
	01- $\not\!$		(Work N	umber)	(Home N	Number)		